

Mississippi Real Estate Commission

2506 Lakeland Drive, Suite 300 Flowood, MS 39232 OR Post Office Box 12685 Jackson, MS 39236-2685

Activation Fee \$25.00

(601) 932-6770 – Telephone * (601) 932-2990 – Fax www.mrec.ms.gov

REACTIVATION OF SALESPERSON

(Application will not be accepted unless typed or printed)

PART I ESTABLISHMENT OF NEW BROKER - SALESPERSON AGREEMENT

Α.	Full Name of Reactivating Sales	person		
	_	_		(Home Phone)
	Applicants Resident Address			
		(Number & Street)	(City/State)	(Zip Code)
	Company Name (if applicable)			
	Company Address			
	Company Address(Numb	er & Street)	(City/State)	(Zip Code)
			Signature of Reactivating Salesperson	
SUBSCRIBED and SWORN to before me, this day of			_ day of	, 20
Му Со	ommission expires			
			(County)	(State)
		NOTA	ARY PUBLIC	
В.	Ι	, hereby certify t	hat I am duly licensed	broker in the State of
Missis	(Name of Responsible Broker) sippi and have "carefully investiga"			
made a	application for transfer of his/her lie ation and "accept full responsibility	cense to my real estate	brokerage business.	I hereby approve such
	Signature of Respo			roker
SUBS	CRIBED and SWORN to before m	e, this	_ day of	, 20
Му Со	ommission expires			
-	-		(County)	(State)
		NOTA	ARY PUBLIC	